PTO/SB/05 (06-03)

Approved for use through 07/31/2003. OMB 0651-0032

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UTILITY		Attorney Docket No.		39524.7900				
PATENT APPLICATION TRANSMITTAL			rentor	CHANG, Yen-Jen				
				Disc Ejection Device			ب ان	
			Express Mail LabelNo.		EV325888355US			
See MPEP	APPLICATION ELEMENTS chapter 600 concerning utility patent application co	ontents.	,	ADDRESS TO:	Commiss P. O. Box	Patent Application sioner for Patents (1450 ia VA 22313-1450	22366	
	ee Transmittal Form (e.g., PTO/SB/17) Submit an original, and a duplicate for fee processin	ng)	7.	CD-ROM or CD Program (Appe)-R in duj ndix)	plicate, large table o€o	mputer	
	pplicant claims small entity status. ee 37 CFR 1.27.			- ,	no Acid S	Sequence Submission		
, , , ,	pecification (Total Pages Freferred arrangement set forth below)	13	a.	Compute	r Readal	ole Form (CRF)		
	Descriptive title of the invention		b.	Specification Se	•	•		
	 Cross Reference to Related Applications 			i. 🔲 CD-F	ROM or (CD-R (2 copies); or		
9	Statement Regarding Fed sponsored R & D Reference to sequence listing, a table,	1		ii. 🔲 Pape	er			
	or a computer program listing appendix Background of the Invention		c.	Statemen	nts verify	ing identity of above co	pies	
- E	Brief Summary of the Invention		AC	COMPANYIN	G APP	LICATION PART	S	
1	Brief Description of the Drawings (if filed) Detailed Description					er sheet & document(s		
	Claim(s) Abstract of the Disclosure		10.	37 CFR 3.73(b) (when there is an a		nt Power of At	torney	
			11.	English Translat	ion Docu	ıment (if applicable)		
4. 🗸 Di	rawing(s) (35 U.S.C. 113) [TotalSheets	7]	12.	Information Disc Statement (IDS)		Copies of II Citations	S	
5. Oath or D		3]	13.	Preliminary Ame	endment			
a.	Newly executed (original or copy)	114 1 🗸	Return Receipt Postcard (MPEP 503)					
b. [Copy from a prior application (37 CF (for continuation/divisional with Box 18 col		(Should be specifically itemized) Certified Copy of Priority Document(s) (if foreign priority is deimed)					
'	DELETION OF INVENTOR(S	6)	13.	(if foreign priority is Nonpublication F	•	under 35 U.S.C. 122		
	Signed statement attached deleting named in the prior application, see	ng inventor(s) 16.	(b)(2)(B)(i). App or its equivalent.	licant mu	ust attach form PTO/SE	3/35	
6. A	1.63(d)(2) and 1.33(b). pplication Data Sheet. See 37 CFR 1.76		17. 🗸			tion of Domestic Represe er of Attorney document	ntative i	
	NTINUING APPLICATION, check appropriate	box, and s	upply the requisi	te information belov	v and in a	preliminary amendment,	· 	
1	ation Data Sheet under 37 CFR 1.76: ontinuation Divisional Continua	ntion in na	ert (CIP) of pe	rior application N	. .			
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For CONTINU	application information: Examiner UATION OR DIVISIONAL APPS only: The entir	e disclosu	re of the prior	Group / Arn application, from	which an	oath or declaration is	.— supplied	
under Box 5t reference. Th	b, is considered a part of the disclosure of the se incorporation <u>can only</u> be relied upon when	accompai a portion h	nying continuat as been inadver	ion or divisional a tently omitted froi	application the sub	n and is hereby incorpor mitted application parts.	rated by	
	19. COI	RRESPO	NDENCE AD	DRESS				
\boxtimes	Customer Number:	ober: 02032		or [Correspondence address below			
	Cynthia L. Pillote							
Name	Snell & Wilmer L.L.P.							
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Country	US Tel	lephone	602-382-6296		Fax	602-382-6070		
Name	(Print/Type) Cynthia L. Pillote		Reais	stration No. (Attom	ey/Agent)	42,999	7	
Signature Date September 18, 2003							-)	
Signati					Date	September 10, 2003		

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Compl t if Known

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FEE TRANSMITTA		Compl t if Known							
•		Application Number TBA							
for FY 2003		Filing Date Se			Septem	mber 18, 2003			
Effective 01/01/2003. Patent fees are subject to annual revisi	on.	First Named Inventor CH			tor CHANG	NG, Yen-Jen			
Applicant claims small entity status. See 37 CFR 1.	27	Examiner Name			TBA	TBA			
		Group Art Unit		TBA	TBA				
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The Director is authorized to: (check all that apply)	1804		1804		Requesting publi				
Charge fee(s) indicated below Credit any overpayments					action			L	
Charge any additional fee(s) during the pendency of this application	1805	1,840*	1805		Requesting publi action	ication of Sil	r aller Examin	lei	
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1. BASIC FILING FEE	1253	930	2253		Extension for rep				
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1001 750 2001 375 Utility filing fee 750.00	1401	320			Notice of Appeal				
1002 330 2002 165 Design filing	1402				Filing a brief in s	•	appeal		
1003 520 2003 260 Plant filing fee	1403		2403		Request for oral		ica nroccadia		
1004 750 2004 375 Reissue filing		1,510	(Petition to institu Petition to revive			'	
1005 160 2005 80 Provisional filing fee	1452								
SUBTOTAL (1) (\$) \$750.00		1,300 1,300	1	•		tion to revive - unintentional ty issue fee (or reissue)			
2. EXTRA CLAIM FEES FOR UTILITY ANDREISSU	1501		}		Design issue fee				
Fee from Extra Claims below Fee Paid			1		Plant issue fee				
Total Claims 10 -20** = 0 X 18.00 = 0.00	~ .		1			tions to the Commissioner			
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1203 280 2203 140 Multiple dependent claim, if not paid	3 1810				(37 CFR § 1.12	29(b))			
1204 84 2204 42 ** Reissue independent claims over original patent	1801		2801		Request for Con				
1205 18 2205 9 ** Reissue claims in excess of 20	1802	900	1802	900	Request for exp of a design appl		nnation		
and over original patent	Oth	Other fee (specify)							
SUBTOTAL (2) (\$) \$0.00									
**or number previously paid, if greater; For Reissues, see abov	e ¹Re	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)					\$) \$40.00		
SUBMITTED BY						Complete (if applicable)		
Name (Print/Type) Cynthia L. Pillote			ration N ey/Agent)		42,999	Telephone	602	2-382-6296	
Signature		>	$\overline{}$			Date	Septeml	ber 18, 2003	

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